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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/031,410			ing Date 21/2002	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY 🛛			OTHER THAN OR SMALL ENTITY		
	FOR	N	UMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A		
	AL CLAIMS CFR 1.16(i))		minus 20 =		*			x \$ =		OR	x \$ =		
IND	EPENDENT CLAIN CFR 1.16(h))	IS	minus 3 =		*			x \$ =			x \$ =		
	APPLICATION SIZE 37 CFR 1.16(s))	shee is \$2 addit	If the specification and dr sheets of paper, the appli is \$250 (\$125 for small er additional 50 sheets or fra 35 U.S.C. 41(a)(1)(G) and			eation size fee due tity) for each ction thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))													
* If t	he difference in col	umn 1 is less than	r "0" in coluı		TOTAL			TOTAL					
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY O			OTHER THAN OR SMALL ENTITY		
AMENDMENT	06/14/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 30	Minus	** 34		= 0		X \$26 =	0	OR	x \$ =		
	Independent (37 CFR 1.16(h))	* 2	Minus	***3		= 0		X \$110 =	0	OR	X \$ =		
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
		(Column 1)		(Columi	n 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	*	Minus	**		=		x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(h))	*	Minus	***		=		x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

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